

The Node *... where a leaf arises from a stem*



The Node is a bilingual publication dedicated to global HIV/AIDS issues by Red Ribbon Centre, the UNAIDS Collaborating Centre for Technical Support

UPDATES INTERNATIONAL HIV/AIDS AND HUMAN RIGHTS GUIDELINES;

CALLS ON GOVERNMENTS TO TAKE SIGNIFICANT HUMAN RIGHTS ACTION

Geneva, 10 September 2002 - Updated guidelines on HIV/AIDS and human rights have been issued to reflect significant political and legal developments relating to HIV/AIDS prevention, treatment, care and support.

"AIDS is a human rights issue," said Ms Mary Robinson, United Nations High Commissioner for Human Rights. "Access to HIV/AIDS treatment is key to realizing the fundamental human right to health. Under international human rights law, states have an obligation to take positive legislative, budgetary and administrative measures that progressively advance the right to the highest attainable standard of health. This commitment should be matched by resources, including from donors and the international community."

The key change pertains to updated Guideline 6 on "Access to prevention, treatment, care and support," which is based upon the following premises:

- Access to HIV/AIDS-related treatment is fundamental to the realization of the right to health;
- Prevention, treatment, care and support are a continuum;
- Access to medication is one element of comprehensive treatment, care and support;
- International cooperation is vital in realizing equitable access to care, treatment and support to all in need.

The revised Guideline 6 is one of 12 International Guidelines on HIV/AIDS and Human Rights published in 1998 by the Office of the High Commissioner for Human Rights (OHCHR) and the Joint United Nations Programme on HIV/AIDS (UNAIDS).

"With the advent of life-prolonging HIV treatment, and price barriers falling, access to treatment is now at the heart of realizing the human rights of people living with HIV/AIDS," said Dr Peter Piot, UNAIDS Executive Director. "The new Guideline 6 will help governments and civil society focus on the need to scale up access to prevention and treatment. Today's unequal and limited access to treatment is unacceptable, with less than 5% of people in the developing world who need HIV medicines having access to them."

In addition to its importance in advancing human rights, the revised guideline strengthens the Declaration of Commitment on HIV/AIDS adopted last year by 189 governments at the UN General Assembly Special Session on HIV/AIDS. At that meeting, governments pledged to reduce HIV prevalence among young people by 25% in worst affected countries by 2005 and globally by 2010.

The revised guideline breaks new ground by calling for specific actions on the part of governments. For example, Guideline 6 asks governments to establish concrete national plans on HIV/AIDS-related treatment, with resources and timelines that progressively lead to equal and universal access to HIV/AIDS-related treatment, care and support; ensure that vulnerable populations have access to treatment, care and support; establish mechanisms that would enable people living

with HIV/AIDS to challenge inequalities and discrimination in accessing HIV/AIDS treatment, care and support; ensure quality control and assurance of medicines, diagnostic and related technologies; and strengthen international cooperation and assistance to HIV/AIDS-related prevention, treatment, care and support through contributions to the recently-established Global Fund to Fight AIDS, Tuberculosis and Malaria.

Guideline 6, an outcome of the international expert consultation on HIV/AIDS and human rights held in Geneva on 25-26 July 2002, provides an up-to-date policy

guidance that is based on current international law and best practice at country level.

The International Guidelines on HIV/AIDS and Human Rights are available on www.unaids.org and www.unhchr.ch.

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Dr. K. Low

CAPACITY BUILDING THROUGH NETWORKING

"Vietnam had its first reported Human Immunodeficiency Virus (HIV) case in December 1990", an HIV expert from Hanoi told the audience at the Red Ribbon Centre. "This had led to the establishment of the first National AIDS Programme by the National AIDS Committee in combating the epidemics in the country... and the number of HIV infected people now stands at around 15,000...". He continued by explaining the roadmap of the Vietnamese HIV prevention programme as well as the up-to-date situation.

A group of eleven experts from Vietnam (including a clinical professor from a university, epidemiologists, and practicing doctors on HIV care) visited Hong Kong during the week of September 23, 2002. Hong Kong forms an important part of the study tour that was organized by the Family Health International (FHI) in promoting knowledge exchange and sharing of experience on HIV/AIDS prevention and care. As we were told, Vietnam has the fastest growing HIV prevalence rates among the populations of sex workers and injection drug users in



Organised by the Family Health International, eleven experts from Vietnam visited Hong Kong to learn how to set up an effective Voluntary HIV Counselling and Testing (VCT) programme.

recent years. Targeted prevention on these populations together with the promotion of HIV testing were therefore vital to their effort in order to curb the spread of HIV infection.

The group spent the first part of their journey in Bangkok to get to know the characteristics of the local HIV prevention programme for commercial sex workers. While in Hong Kong, their main objective was to learn how to set up effective Voluntary HIV counselling and Testing (VCT) programme through taking reference from an already successful model. During their 3-days tour here, the group had witnessed first-hand the intricate operation of many health care facilities that were related to HIV testing and prevention. These included the Methadone Clinic, Social Hygiene Clinic, HIV medical clinic, the VCT clinic and an HIV/AIDS resource center (Red Ribbon Centre or RRC). Each setting has a different kind of VCT programme operated, depending

on special needs. This further highlighted the importance of a versatility of VCT frameworks, which should be designed and adapted based on the characteristics of the target population and the unique needs.

Comparing with many study tours of similar nature in the past, this particular one was considered extremely useful for both the group participants and us, because there was an additional feature of which a short scheduled presentation provided by the group visitors on their country's HIV epidemiology. This not only helps us identify more clearly with the needs of the participants but also enables us to get a better understanding on their prevention programme as well as the current HIV/AIDS situation. With continuing effort of the RRC, it is hoped that the resource center can soon become the hub for HIV information and experience sharing on HIV/AIDS prevention in this region; this in turns will connect all the HIV workers together in one place in the fight against AIDS.

DELEGATES FROM THE CHINESE CENTRE FOR DISEASE CONTROL AND PREVENTION

Dr. Wan Wai-yee

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Since the establishment of the Red Ribbon Centre (RRC) in 1996, and its designation as an UNAIDS Collaborating Centre for Technical Support (UCT) in 1998, the RRC has been a resource centre for AIDS health education, the avenue for training and community activities, and it is also the executive arm of the Hong Kong AIDS unit in liaison with mainland China as well as the international field.

From 28 September to 30 September 2002, three members from the Chinese Centre for Disease Control and Prevention visited the RRC. The aim of the visit was to see the operation and management of the RRC, and to apply the relevant model to a newly established national AIDS resource and education centre in Beijing. Two members from National Centre for AIDS/STD Control and Prevention, Chinese Centre for Disease Control and Prevention are Dr. YU Dong-bao, Associate Professor and Deputy Chief, Division of Health Education and Intervention, and Ms. WANG Gui-ying, Associate Editor in Chief, National Centre for AIDS/



The Nursing Officers of Red Ribbon Centre (first and second from left) explained to the Beijing delegates: Ms WANG Gui-ying (middle) from National Centre for AIDS/STD Control and Prevention, and Dr REN Xue-feng (second from right) from Institute for Health Education, Chinese Centre for Disease Control and Prevention, on the library operation system of the Centre. On the right was Dr. YU Dong-bao from the National Centre for AIDS/STD Control and Prevention.

STD Control and Prevention. Another member was Dr. REN Xue-feng, Director, Research Associate IEC Centre, Institute for Health Education, Chinese Centre for Disease Control and Prevention.

A special workshop was arranged to introduce the RRC to the team. Dr. WAN Wai-ye of the RRC delivered an overview of the HIV/AIDS services in Hong Kong, as well as the particular mission of the RRC in its societal context. The introduction started with some nostalgic reminiscence of the establishment of RRC since its early days, and how the RRC has evolved through the years to its present status. In contrast to the Darwinian theory, the force of evolution of the RRC comes not only from the change in the external societal environment and the maturing AIDS epidemic profile, but also from the internal initiatives from clinical governance and evaluation. There was some active and fruitful discussion in models of health education resource centre in different social settings.

Special emphasis of the workshop was on the operation of the RRC, and the Nursing Officer in-charge of RRC, Ms Victoria KWONG, showed the ropes of the centre's operation on the day-to-day basis. The team was particularly interested to the actual production of information of education communication materials, and the establishment and maintenance of the library and WebPages.

The team had lunch with Dr. Homer TSO, Chairman of the Advisory Council on AIDS (ACA), Dr. Richard TAN of the Lions Clubs International District 303 Hong Kong & Macau and also member of the ACA, and the team was also introduced to the RRC Management Advisory Committee including the chairman Rev CHU Yiu-ming, and some members including Mr. Tony Pang, Mr. Billy HO and Mr. LAW Chiu-fai.

As the various AIDS non-government organizations play an important role in delivery of services to the community, the workshop would be incomplete without the participation of some of the AIDS NGOs introducing their work to the delegates. Ms Alice CHAN, the Chief Executive Officer, and Ms Adeline LAU of the Society for AIDS Care, Ms Yan CHAN, Deputy Chief Executive (Programme) of the Hong Kong AIDS Foundation, and Mr. Chung LAU, Prevention Officer of the AIDS Concern had shared their experience of serving the community. It was understood that there may be a spectrum of role of NGOs in different societies, and the targeted intervention for different risk behaviors would also varied, but community participation in general is an empowering and workable concept that contributes directly to the community ownership and sustainability of the programme. There was interesting discussion on applying the HK experience to the different community settings in China.

The workshop ended with a discussion session with Dr. SS LEE, the Consultant (Special Preventive Programme), in which the delegates also concluded their experience regarding the planning of the new national AIDS resource centre. The workshop has reaffirmed that AIDS prevention work is no doubt a priority in Mainland and the strategic location of Hong Kong has given us an advantage to share our experience. The mutual learning from this visit was constructive, and should pave the way to further collaboration in future.



The delegates met the Chairman, Rev CHU Yiu-ming (Front row; first from left) and members of the Red Ribbon Centre Management Advisory Committee, and Dr Homer TSO Chairman (Front row; third from left) and member of the Hong Kong Advisory Council on AIDS, to discuss about the societal role of the Centre and the Advisory role of the Council.

EXPLORING STANDARDS IN HIV TREATMENT

Between 9 and 11 September 2002, participants from different countries in the Asia Pacific region gathered in Chicago for the first ever APEC Conference on Quality Improvement through Accreditation. The Conference had aimed to facilitate an interactive forum for discussion of effective, self-sustaining national healthcare quality programmes and accreditation regimes. HIV/AIDS was one of the focal issues in the Conference.

The attention on HIV/AIDS had followed the APEC leaders' decision to address HIV/AIDS as a priority area, alongside the strategy to respond to emerging infections on a global level. The introduction of combination antiretroviral treatment in the industrialised nations had led to the demand for standards in clinical HIV medicine. Such movement was

echoed by multilateral agencies like the Asia Pacific Economic Cooperation. Accreditation was considered one of the effective means for upholding the quality of HIV services, a direction taken on by hospitals and other medical services around the world.

The accreditation of HIV services would be a long time vision for health care providers and professionals. The complexity of HIV/AIDS and the intricate relationship between different facets of care programmes would mean that this would not be an easy job. The bringing together of international experts and stakeholders would be a useful starting point towards the common vision of quality HIV care for people living with the infection.

Dr. Krystal Lee

LIONS RED RIBBON FELLOWSHIP

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A total of 4 Lions Red Ribbon Fellows from China visited us in last two months. Organized by the Red Ribbon Centre and sponsored by Lions Clubs International District 303 - Hong Kong and Macau, the Lions Red Ribbon Fellow Scheme aims to facilitate experience sharing, technical exchange and encourage collaboration and networking.

Dr. Yang Jun, who works in Qiao Kou District Public Health and Anti-epidemic station, Wuhan, stayed in Hong Kong between 20 August and 2 September 2002. Since last year, she has been involving in the 100% Condom Use Programme in Wuhan. During her stay in Hong Kong, she visited various organizations that offer HIV prevention services especially those with outreach activities and targeted commercial sex workers. The 100% Condom Use Programme in Wuhan was introduced and presented by Dr. Yang in the seminar held in Red Ribbon Centre.

The second and third fellows started their visit at the same time. Dr. Song Jing Ling from Yunnan and Dr Hu Fei Yue from Beijing, both spent a fortnight in Hong Kong in early September, 2002. Dr Song is an assistant professor in Pathology as well as an officer in the Education Department of Yunnan Province. She visited a range of organizations which provide HIV prevention and education programme focused on youth. Mr. Lee Chi Hoi from Education Department was also invited to share his experience in Hong Kong with our fellow.

Dr. Hu is the Deputy Director of the Division of Policy Study and Information, National Center for AIDS/STD Control and Prevention. He returned to Beijing last year after his achievements in two PhDs in Medicine and Politics in Japan. Apart from visiting the AIDS related services in Hong Kong, noteworthy discussions with the Chairman of Advisory Councils on AIDS, Dr. Homer Tso, JP and our consultant of the Special Preventive Programme, Dr. SS Lee were held.

Dr. Li Hong from Henan also joined Dr. Song and Dr. Hu in their second week of stay in Hong Kong. Dr. Li is currently working in the Institute of STD/AIDS in Henan, mainly on HIV laboratory diagnosis and its practice and control. She is interested in establishing a pre- and post- test counseling service in Henan. Ms. Georgiana Cheung and the staff from our voluntary counseling and testing service discussed and shared our experience with her. A visit to the Human Immunodeficiency Virus Laboratory was also arranged.

The three Lions Red Ribbon Fellows conducted a seminar on 12 September at Red Ribbon Centre. The topics of presentation were *AIDS prevention programme in Universities in Yunnan Province* by Dr. Song Jing Ling, *HIV/AIDS situation in China and its policy development* by Dr. Hu Fei Yue and *HIV/AIDS situation in Henan Province and its preventive measures* by Dr. Li Hong.

PROGRAMME ON 'PROMOTING SAFE INJECTION PRACTICE IN HEALTH CARE SETTING' ZHIGUI, HUBEI

The Department of Health Hong Kong was approached for providing technical advice in the WHO project with Mainland China. The project titled 'Health education and promotion programme on safe injection practice in health care settings in Zhigui county' was proposed for inclusion in the WHO Global Programme on Health Promotion Effectiveness. The rationale of the project is that the enforcement of safe injection could reduce the transmission of blood borne infections, including HIV and HBV, thereby, promoting health. The programme was coordinated by Dr. KC Tang, Senior Professional Officer of WHO's National and Community programme, Department of Noncommunicable Diseases Prevention and Health Promotion.

The project involves the development of training for health care workers, the promotion of the use of disposable syringes in local health institutes, organisation of recycling procedures for used injection equipment, and the promotion of public awareness through publicity effort. It is necessary to have a clear understanding of their current practice, staff competency and availability of resources before initiation of intervention. A field visit therefore was paid to Zhigui on 17 to 20 September. Dr. SS Lee and Ms. Elsie Chu of the Special Preventive Programme, together with Dr. KC Tang participated in the visit. Different levels of health institutions were visited to assess the injection practices, including the Zhigui county hospital, one village hospital, two village clinics and a village doctor's clinic. Meetings with county health staff to discuss on key issues were held after the visits.

The health staff in the province are aware of the importance of safe injection at local level and were



Dr S S Lee (1st from right) Consultant, Special Preventive Programme and Ms Elsie Chu (2nd from right) Senior Nursing Officer, Special Preventive Programme visited different levels of health institutions to assess the injection practices in Zhigui County.



Dr SS Lee (1st from right) Consultant, Special Preventive Programme and Dr KC Tang (2nd from right) Senior Professional Officer, WHO seated to discuss the plan on developing health education and promotion programme on safe injection practice in health care setting.

committed to develop an effective project. It was noticed that administering injections especially infusions, have been a norm in treating minor ailments. The use of disposable injection equipment as a means of ensuring safety was fast becoming a standard practice well accepted by health professional and the public. One drawback was that all items needed to be paid for by individual clients. Regarding the disposal of sharps, sharps boxes are not available. Methods adopted for disposal of sharps varies with individual institutes yet all poses the risks to sharps injuries of health care staff and the public. From dialogue with health care staff, their concept about infection control practice were rather vague, and there is not yet a system in place to govern infection control practice such as availability of protocols and guideline, or monitoring mechanism.

Based on the understanding of the current practice and the constraints in the county and villages, SPP staff hopefully would be able to draw feasible plans in support to the project. Training would be one important aspect of technical assistance to be offered to health professionals and programme staff. Introducing the concept of practicing infection control in health care settings to prevent blood borne diseases should be the very first step to path the way to further development of the programme. A train the trainer workshop will be planned to tie in with the initial phase of their programme. The content would be on various aspects of intervention activities, including safe injections, sharps disposal and safety of health care workers. Assistance and advice would also be given on the development of protocols for safe injection and sharps disposal within their means. The SPP would also support their setting up of monitoring system to ensure that the programmes are functioned and sustained.